

Bella Vista Police Department

105 Town Center
Bella Vista, Arkansas

Application for Discharge of Firearm Permit Ordinance # 2010-05

Name: _____ Phone: _____

Address: _____

Age: _____ Date of Birth: _____ Arkansas Drivers License #: _____

Location of Discharge: _____

Dates/Time requested for permit: _____

Name of Property Owner: _____

(If other than applicant, attach written permission)

Safety Precautions: _____

Do you have an Arkansas Hunting License? _____

Firearms to be discharged: _____

(Make, Model, Caliber/Gauge, Serial Number) List additional Firearms on Back.

Describe Nuisance: _____

Disposal Plan: _____

Have you tried other abatement techniques? (ie.Trapping) _____

Have you applied from a Depredation Permit from the Arkansas Game and Fish Commission or the U.S. Fish and Wildlife Service? _____

Has the permit been issued? _____

Attach a copy of the Depredation Permit if available.

Return this application to Chief James Graves at the Bella Vista Police Department, 105 Town Center, Bella Vista, AR 72714 along with a \$15.00 non-refundable fee, or a \$5.00 non-refundable fee if you have applied for a permit for the same purpose within the last twelve (12) months. You will be notified of the status of the application within ten (10) business days.

Approved _____

Denied _____

Chief of Police

Mayor